

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

KERRY D. AUSTIN, on behalf of himself  
and all others similarly situated,  
Plaintiff(s),  
v.

UNION BOND & TRUST CO., et al.

Defendant(s).

Civil Case No. 3:14-cv-00706-ST

APPLICATION FOR SPECIAL  
ADMISSION – *PRO HAC VICE*

Attorney MICHAEL C. MCKAY requests special admission *pro hac vice* in the above-captioned case.

**Certification of Attorney Seeking *Pro Hac Vice* Admission:** I have read and understand the requirements of LR 83-3, and certify that the following information is correct:

**(1) PERSONAL DATA:**

Name: <u>MCKAY</u>	<u>MICHAEL</u>	<u>C.</u>
<small>(Last Name)</small>	<small>(First Name)</small>	<small>(MI)</small>
<u>SCHNEIDER WALLACE COTTRELL &amp; KONECKY LLP</u>		
Mailing Address: <u>8501 North Scottsdale Road, Suite 270</u>		
City: <u>Scottsdale</u>	State: <u>AZ</u>	Zip: <u>85253</u>
Phone Number: <u>(480) 428-0141</u> Fax Number: <u>(866) 505-8036</u>		
Business E-mail Address: <u>mmckay@schneiderwallace.com</u>		

**(2) BAR ADMISSIONS INFORMATION:**

- (a) State bar admission(s), date(s) of admission, and bar ID number(s):

AZ, 10/2004, 023354

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- (b) Other federal court admission(s), date(s) of admission, and bar ID number(s):
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**(3) CERTIFICATION OF DISCIPLINARY ACTIONS:**

- (a)  I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or
- (b)  I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)

**(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:**

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

**(5) REPRESENTATION STATEMENT:**

I am representing the following party(s) in this case:

Plaintiff KERRY D. AUSTIN, on behalf of himself  
and all others similarly situated

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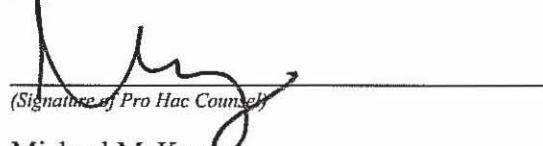
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**(6) CM/ECF REGISTRATION:**

Concurrent with approval of this *pro hac vice* application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at [ord.uscourts.gov](http://ord.uscourts.gov)), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon.

DATED this 29th day of April, 2014

  
Michael McKay  
(Typed Name)

**CERTIFICATION OF ASSOCIATED LOCAL COUNSEL:**

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case.

DATED this 29th day of April, 2014

s/Timothy S. DeJong  
(Signature of Local Counsel)

Name: DeJong Timothy S. (Last Name) (First Name) S. (Ml) (Suffix)

Oregon State Bar Number: 940662

Firm or Business Affiliation: Stoll Stoll Berne Lokting & Shlachter P.C.

Mailing Address: 209 S.W. Oak St., Suite 500

City: Portland State: OR Zip: 97204

Phone Number: (503) 227-1600 Business E-mail Address: (503) 227-6840

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**COURT ACTION**

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- Application approved subject to payment of fees.  
 Application denied.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Judge